1. oil

well

below.)

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

gas

well

AT SURFACE: T31N, R6W
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

REPORT, OR OTHER DATA

Completion

REQUEST FOR APPROVAL TO:
TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*

(other)

X

AMOCO PRODUCTION COMPANY

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)

501 Airport Drive Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,

790' FNL x 1130' FWL, Section 16,

SUBSEQUENT REPORT OF:

other

	Budget Bureau No. 42-R1424
5.	LEASE
	SF-078766
6.	IF INDIAN, ALLOTTEE OR TRIBE NAME
7.	UNIT AGREEMENT NAME
	Rosa Unit
8.	FARM OR LEASE NAME
9.	WELL NO.
	69
10.	FIELD OR WILDCAT NAME
	Basin Dakota
11.	SEC., T., R., M., OR BLK. AND SURVEY OF
	AREA NW/4 NW/4 Section 1 T31N, R6W
12.	COUNTY OR PARISH 13. STATE
	San Juan NM
14.	API NO.
	30-045-23518
15.	ELEVATIONS (SHOW DF, KDB, AND WD
	6371 ' GL
(N	OTE: Report results of multiple completion or zon
	change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Completion operations commenced on 7/23/79. Circulated out hole with 2% KCL clay stabilizer and pressure tested; held OK.

Perforated from 8041'-8064' with 2 SPF; total of 46 holes. Sand-water fraced with 110,208 gallons frac fluid and 210,000# sand.

Perforated second stage from 7919' - 7975' with 2 SPF; total of 80 holes. Sandwater fraced 140,000 gallons frac fluid and 310,000# sand.

Swabbed well and released completion rig on 8/27/79.

Subsurface Safety valve: Manu. and Typ	set @	Cip		
18. I hereby certify that the foregoing is Original Signed By				
SIGNED E. E. SVORC	TITLE Dist. Adm.	Supvr DATE	8/28/79	·
APPROVED BY	TITLE	DATE	1	·